



#12  
RCE  
y Robinson  
7/24/03

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application No.: 10/045,137 Confirmation No.: 3416  
First Named Inventor: Wang, Albert Z. H. Filing Date: 23 October 2001  
Group Art Unit: 2811 Examiner: Hu, S.  
Atty. Docket No.: NS-3868-2C US  
Title: Dual Direction Over-Voltage And Over-Current IC Protection  
Device And Its Cell Structure  
Assignee(s): National Semiconductor Corporation

Mountain View, California  
10 June 2003

**MAIL STOP RCE  
COMMISSIONER FOR PATENTS  
PO Box 1450  
Alexandria, Virginia 22313-1450**

**REQUEST FOR CONTINUED EXAMINATION  
UNDER 37 CFR 1.114**

Sir:

This is a Request for Continued Examination ("RCE") of the above patent application under 37 CFR 1.114.

Please enter and/or consider the following document which is enclosed or was previously submitted: Amendment, dated 10 June 2003.

The RCE fee required under 37 CFR 1.17(e) is authorized in an accompanying transmittal letter.

Please telephone Attorney for Applicant(s) at 650-964-9767 if there are any questions.

**EXPRESS MAIL LABEL NO.:**

**ER 070 767 528 US**

Respectfully submitted,

*Ronald J. Meetin*

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Attorney for Applicant(s)  
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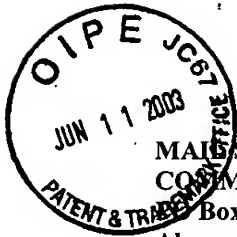
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10 June 2003

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2811

MAILED STOP RCE  
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Box 1450  
Alexandria, Virginia 22313-1450

Re: Application No.: 10/045,137 Confirmation No.: 3416  
First Inventor: Albert Z.H. Wang Filing Date: October 23, 2001  
Group Art Unit: 2811 Examiner: Hu, S.  
Atty. Docket No.: NS-3868-2C US  
Title: Dual Direction Over-Voltage And Over-Current IC Protection Device And Its Cell Structure  
Assignee: National Semiconductor Corporation

Sir:

Transmitted herewith are the following documents for the above patent application:

- (1) Return Receipt Postcard;
- (2) This Transmittal Letter (in duplicate);
- (3) RCE (1 pp.);
- (4) Amendment (13 pps.);
- (5) Appendix (4 pps.); and
- (6) Gray ref.

☒ The fee has been calculated as shown below:

**CLAIMS AS AMENDED**

|  | Claims Remaining<br><u>After Amendment</u>   |       | Highest No.<br>Previously<br><u>Paid For</u> |   | Present<br><u>Extra</u> |   | <u>Rate</u> |    | <u>Additional Fee</u> |
|--|--|-------|--|---|-------------------------|---|-------------|----|-----------------------|
| Total Claims   | 25   | Minus | 20   | = | 5                       | x | \$18.00     | \$ | 90.00                 |
| Independent<br>Claims                                  | 3  | Minus | 3  | = | 0                       | x | \$84.00     | \$ | 0.00                  |
| <input type="checkbox"/>                               | Fee of \$280 for the first filing of one or more multiple dependent claims   |       |  |   |                         |   |             | \$ | 0.00                  |
| <input type="checkbox"/>                               | Fee for Request for Extension of Time (      month(s))   |       |  |   |                         |   |             | \$ | 0.00                  |
| <input checked="" type="checkbox"/>                    | Fee for Request for Continued Examination  |       |  |   |                         |   |             | \$ | 750.00                |
| <b><u>Total additional fee for this Amendment:</u></b> |  |       |  |   |                         |   |             | \$ | 840.00                |
| <input checked="" type="checkbox"/>                    | Please charge Deposit Account No. 502641 in the amount of  |       |  |   |                         |   |             | \$ | 840.00                |
| <input checked="" type="checkbox"/>                    | Conditional Petition for Extension of Time: If an extension of time is required, the Commissioner is authorized to deduct the necessary fee from Deposit Account No. 502641. |       |  |   |                         |   |             |    |                       |
| <input checked="" type="checkbox"/>                    | Also, charge any additional fees required and credit any overpayment to Deposit Account No. 502641.  |       |  |   |                         |   |             |    |                       |
| <input type="checkbox"/>                               | Enclosed is a check in the amount of   |       |  |   |                         |   |             | \$ |                       |

**EXPRESS MAIL LABEL NO.:**

**ER 070 767 528 US**

Respectfully submitted,

*Ronald J. Meetin*

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#10K (NE)  
Amend C  
y Robinson  
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AMENDMENT

Sir:

Responsive to the Office Action mailed 11 March 2003, please amend the above patent application as follows:

IN THE CLAIMS

Amend Claims 2, 3, and 5 - 8 to read:

C1  
--2. (Twice amended) The ESD protection structure of Claim 8, wherein said first conductivity type is n-type, and said second conductivity type is p-type.

3. (Twice amended) The ESD protection structure of Claim 8, wherein said first conductivity type is p-type, and said second conductivity type is n-type.

C2  
5. (Three times amended) The ESD protection structure of Claim 8, wherein said third semiconductor region includes a well region of said first conductivity type formed in a semiconductor substrate of said second conductivity type.

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